

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-001)**

SERIAL NO.
588492
APPLICANT'S

FILING DATE
6-6-00

CLAIMS

| | AS FILED | | AFTER 1st ASSIGNMENT | | AFTER 2nd ASSIGNMENT | |
|-------|----------|------|-------------------------|------|-------------------------|------|
| | NO. | DEF. | NO. | DEF. | NO. | DEF. |
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BEST AVAILABLE COPY